SUPPLEMENT TO THE

# BRITISH MEDICAL JOURNAL

LONDON SATURDAY NOVEMBER 20 1943

## GENERAL PRACTICE COMMITTEE OF THE B.M.A.

The first meeting of the General Practice Committee for the new session was held at the end of October, and Dr. S. Wand was re-elected to the chair. The subcommittees concerned with colliery and works practice, with Post Office medical officers, with ship surgeons, with public medical services, and with the industrial medical service were reconstituted. A report was made on the committee's proposals, put forward at the last meeting, concerning the fee for examination of employees under the Ministry of Supply. It was stated that the Department had accepted the proposals subject to the overriding maximum of £2 per day being limited to the examination of ten persons in any one day, and that the new rates had now been in operation as from July and had been made applicable to all appointments. No difficulty was being experienced by the Local Medical War Committees in securing nominations of practitioners for this work.

### Post Office and Fire Service: Capitation Fees

The capitation fee for Post Office medical officers had been discussed informally with the Chief Medical Officer of the General Post Office. It had now been agreed by the Treasury that the fee should be raised from 12s. to 12s. 6d., subject to review after the war or earlier if circumstances altered. One point brought out in the correspondence was that, although the Department admitted that owing to wartime difficulties Post Office capitation lists contained a greater proportion of older and more infirm officers than in former times, a very large number of Post Office servants retained after the age of 60 had nevertheless relinquished their established status at that age and as temporary officers were ineligible for free medical attendance. In discussion it was pointed out that the difficulty of accepting a conditioned fee for one section of the people was that it was then used as a precedent for another section. It was agreed, while not subscribing to the view that 12s. 6d. was an adequate capitation fee, to recommend members to accept it at the present juncture.

Following the increase in the capitation fee to Post Office medical officers, a similar increase was proposed by the Fire Service Department, who also suggested that this was an opportunity to bring into operation a graduated scale of payment in respect of higher ranks. The suggested figures were given in Dr. Wand's speech at the Annual Representative Meeting (*Supplement*, Oct. 2). One member of the committee asked whether a graduated scale might not carry awkward implications for the future capitation fee under National Health Insurance, but it was pointed out in reply that there were no means of sorting insured persons into salary classifications, whereas in such a service as the National Fire Service the actual amount of remuneration is known and the capitation fee can be graded accordingly.

The committee agreed that it was prepared to accept as a wartime measure the suggested rate of 12s. 9d. for leading firemen, section leaders, and company officers, but it was not prepared to accept 12s. 6d. for the ordinary firemen as proposed; the minimum fee for all grades should be 12s. 9d. It was also agreed to ask that those over the income limit of £420 should have provision made for them on an item-of-service basis. The committee further adopted certain proposals made by the Isle of Wight at the Annual Representative Meeting, that it should not be obligatory upon the medical officer to supply drugs and dressings where he did not ordinarily dispense, and that the payment, if he did supply these drugs and dressings, should be not less than that paid under National Health Insurance; also that the provision for mileage should be payable above two miles as in the case of National Health Insurance patients.

### Certificate Forms

Some resolutions had been received concerning the Ministry of Labour and National Service Form E.D.652, suggesting that the issue of this form was unnecessary or rejecting the idea of a uniform fee; but the CHAIRMAN of the committee stated that the fee was the ordinary one, used throughout the country more or less, and also that there was no compulsion on the doctor to use the form if he preferred his own, on which he could charge any fee he liked. The DEPUTY SECRETARY said that the idea behind the certificate was that doctors were having difficulty in getting a fee for this type of certificate, and the inclusion of the statement that the fee was the patient's liability was helpful. These certificates laying down the fee also helped to rebut the allegation that doctors were charging unduly large fees for this form of certification.

Discussion also arose on the Ministry of Pensions Form A.O.38. The view of the committee was that it was in the interest of the patient discharged from the Forces that the doctor should give the information required, but it was felt that the fee should be paid by the Ministry of Pensions to the doctor rendering the report.

### Health of Women in Factories

Dr. DAIN presented the report of the Industrial Medical Service Subcommittee. Its recommendations regarding pregnant women in factories were adopted—namely, that the question whether work was likely to be detrimental to the normal pregnant woman depended upon its character and each case must be decided after careful consideration of all the factors involved; that ordinary factory work was usually inadvisable during the last six or eight weeks of pregnancy; that a careful examination should always be carried out before a woman returned to work, and the most suitable time for this examination was at the end of the six weeks following confinement; and that it was desirable that it should be made economically possible for a woman employed in industry to breast-feed her child.

A final question dealt with by the committee was that of surgical belts and corsets. The SECRETARY said that he was meeting the Board of Trade with regard to the issue of certificates for the supply of these and required some guidance. Apparently the supply was being abused, and people were obtaining corsets who were not, on medical grounds, entitled to them. It was stated that there was an increasing tendency for people to go to the doctor and request certificates for all sorts of things which they had not been in the habit of having, and the doctor was often placed in an embarrassing position. It was suggested that it would be helpful if a list of conditions in which certificates for surgical belts and corsets would be justifiable could be drawn up and published in the *Journal* for the guidance of practitioners.

## Correspondence

### Future of Medical Practice

SIR,—I have long resisted the temptation to rush into print in the *Journal* on the matter of the future of medical practice, but can no longer rest without replying to the letter from the eleven Birmingham doctors, printed in the *Supplement* (Nov. 6, p. 82).

I beg to differ very much from the last paragraph of their letter, in which they state, after enumerating certain conditions, including a salary, that they believe "a full-time medical service, containing these conditions of service, would be welcomed by all doctors who entered the profession as a vocation. . . ." On the contrary, I believe that the great majority of the profession wish to be left alone to carry on general practice very much as they do now, with the addition of certain safeguards and improvements—e.g., easy access to biochemical and pathological investigation, health centres in selected areas, more chance of holidays, possibly pensions, etc. Continuing on this line, I feel certain that a whole-time salaried State Medical Service is not in the best interest of the patient or the doctor.

The "eleven doctors" fall into the common mistake of assuming that because salaried medical service in the municipal hospitals in our city is a great success and furnishes very excellent work, the same will necessarily apply to salaried general practice. In my opinion general practice can be compared with no other profession, trade, or with any other branch of medicine itself. The only possible comparison is with the

teaching profession, and I am sure that no one will claim that Government salaried education service at the present time is satisfactory or productive of the result that we should expect in these enlightened times.

I feel it should be noted that 11 out of more than 800 doctors in this city is an even smaller percentage in favour of a salaried State Medical Service than 10 against 200 who were in support of such a service at the A.R.M.—I am, etc.,

Birmingham. FRANK E. GOULD.

### Health Centres

SIR,—In a recent interview with Press representatives the Deputy Secretary of the B.M.A. stated that on no account should health centres become glorified out-patient halls. This point is raised by laymen at any joint discussion on a future medical service and it cannot be emphasized too often: (1) that our present hospital out-patient departments must present a more congenial exterior, and the method of appointments improved; (2) that health centres must be designed with every consideration for the privacy of the patient. I have a feeling that at present we are paying too much attention to the purely medical side of a future service and the doctor-patient relationship.

One great attraction of the health centre is the ancillary services that automatically come into the full picture, particularly the nursing and secretarial services. Health centres are still in the experimental stage and cannot come into full use for a long time, but I believe it is far from impossible to include at an early date in a comprehensive medical service a nursing and secretarial branch which should be at the full disposal of all general practitioners. The present district nursing organization greatly augmented would be able to help the doctor in his surgery and have a more intimate contact than at present, when it undertakes only domiciliary work. In view of the present shortage of qualified nurses full use could be made of Red Cross and St. John nurses. Nurses and secretaries would have to be allocated according to the numbers on a doctor's list. Where doctors are already working in groups no difficulty should arise, but where doctors are working alone a method of sharing might have to be devised. Medical personnel will be short for a good many years after the war, but by the inclusion of these ancillary services as a right there should be a considerable easing of the many duties that should not primarily have to be done by doctors.—I am, etc.,

Birmingham. R. C. L. BURGES.

### Recording N.H.I. Certificates

SIR,—One is seeing many patients who require a "certificate" to cover an absence from work of a few days during which there has been no attendance. The frequency with which a man seeks this help may well prove worth noting. In my own practice as a time-saving measure I have adopted the abbreviation "E.D.652 alt." (referring to the new certificate) on the medical record card. May I suggest the general adoption of this idea?—I am, etc.,

West Bromwich. D. SAKLATVALA.

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Dr. Donald Campbell has been appointed chairman of the St. Helens Insurance Committee for the ninth consecutive year.

### "ANTI-FREEZE"

Doctors are reminded that applications for permission to acquire supplies of official anti-freeze mixture should be addressed to the Regional Transport Commissioners, whose addresses in England and Wales are given in the statement on car repairs in the *Supplement* of Nov. 6 (p. 80). At the same time we would point out that "froidene" anti-freeze mixture, for which no consumer's permit is needed, may be obtained from James Woolley Sons and Co., Ltd., Manchester.

## MEDICAL WAR RELIEF FUND

### FIFTY-SECOND LIST

*Amount previously acknowledged*—£50,934 3s. 9d. *and* £100 3½% *Conversion Stock, and* £40 3% *Defence Bonds; also* £39 4s. *for Books for Prisoners of War.*

*Individual Subscriptions*

**£20.**—Dr. D. T. Daintree, Bengal (3rd donation).

**£5 5s.**—Lt.-Col. T. F. Ritchie, R.A.M.C. (ret.), Gateshead (2nd donation).

**£5.**—Dr. S. T. Nakib, Iraq.

**£2 7s. 6d.**—Dr. A. Woodman, Darlington.

**£1 1s.**—Dr. T. B. Evans, Prestatyn (18th donation); Major W. Happer, I.M.S., and Mrs. Happer (19th donation).

**10s.**—Capt. G. C. Tresidder, I.M.S.

**£45 9s. 11d.**—Harrow Division, Unaccompanied Evacuated Children Fund, per Dr. N. P. Jewell (amount already sent £138 0s. 9d.).

**£21.**—Medical Staff, Bishop's Stortford Hospital, per Lieut.-Col. Dunne (amount already sent £21).

**£11 10s.**—Isle of Man Branch, per Dr. D. Pantin (amount already sent £155 14s.): Dr. R. Marshall, 10s. (6th donation); Dr. A. K. Soutar, £1 1s. (5th donation); Dr. J. H. J. Stuart, 10s. (5th donation); Dr. L. D. Woods, £5 5s. (6th donation); Dr. G. R. D. McGeagh, £3 3s. (6th donation); Dr. E. E. Brierley, £1 1s. (6th donation).

**£5.**—Plymouth Medical Society, per Mr. Elliot Square (amount already sent £10); Hon. Medical Staff, Eston Hospital, per Dr. J. W. Ridley.

*Total*—£51,057 8s. 2d. *and* £100 3½% *Conversion Stock, and* £40 3% *Defence Bonds.*

*Sums for Books for Prisoners of War*
*Amount previously acknowledged*—£39 4s.

**£12.**—Proceeds of Staff Dance held by Medical Residents of Manchester Royal Infirmary, per Dr. Guthkelch.

**£7.**—Leigh Division, per Dr. J. H. Young: 10s. each from Drs. A. Patton, R. Hamilton, H. R. Harris, T. Gray, S. Franks, M. M. McClelland, S. H. Ryan, J. Jones, J. S. Martin, G. E. Hayward, J. H. Young, H. Tickle, A. McInnes, M. Dillon.

**£5.**—Lincs. (Holland) Panel Committee.

**£3 15s.**—Mrs. Francis Ivens Knowles, Truro.

**£2 2s.**—Major H. Cullumbine, R.A.M.C.; Mr. F. A. Juler, London; Dr. Margaret B. Steel, Tynemouth.

**£2.**—Capt. S. F. Lindsay, R.A.M.C.

**£1 1s.**—Dr. E. Cretney, Goole; Dr. C. E. Harrison, Dereham.

*Total*—£77 7s.

Cheques, payable to the Medical War Relief Fund, should be sent to Dr. G. C. Anderson, Hon. Treasurer of the Fund, British Medical Association House, Tavistock Square, London, W.C.1.

## POSTGRADUATE NEWS

The Fellowship of Medicine announces the following postgraduate courses for M.R.C.P. candidates: Chest diseases, at Brompton Hospital, 3.30 p.m. on Tues. and Thurs., from Nov. 25 to Dec. 21, and neurology, at West End Hospital for Nervous Diseases, 2.45 p.m., on Tues. and Fri. Nov. 26 to Dec. 21.

The National Association for the Prevention of Tuberculosis is collaborating with the London Medical and Panel Committee and the London Public Medical Service in organizing a refresher course in tuberculosis for general practitioners. It will be held at the Medical Society of London, 11, Chandos Street, Cavendish Square, W. on the afternoon of Thursday, Dec. 16, and the whole of Sunday, Dec. 19 The lecturers are Drs. Joseph Smart, James Maxwell, Mr. T. Holmes Sellors, and Drs. Peter Kerley, C. H. C. Toussaint, Wilfrid Sheldon, and Andrew Morland. This course is the first of a series to be arranged in London and different parts of the country. Inquiries should be sent to the Secretary, N.A.P.T., Tavistock House North, Tavistock Square, W.C.1.

A course of instruction for a Diploma in Psychological Medicine will open at the Maudsley Hospital on Jan. 3.

## WEEKLY POSTGRADUATE DIARY

BRITISH POSTGRADUATE MEDICAL SCHOOL, Ducane Road, W.—*Daily*, 10 a.m. to 4 p.m., Medical Clinics, Surgical Clinics and Operations, Obstetrics and Gynaecological Clinics and Operations. *Daily*, 1.30 p.m., Post-mortems. *Tues.*, 10 a.m., Paediatric Clinic; 11 a.m., Gynaecological Clinic; 2 p.m., Dr. E. J. King: Acidosis and Alkalosis. *Wed.*, 11.30 a.m., Medical Conference. *Thurs.*, 12 noon, Gynaecological Conference; 2 p.m. Dermatological Conference; 2.15 p.m., *X*-ray demonstration on "The Stomach." *Fri.*, 12.15 p.m., Surgical Conference; 2 p.m., Neurological Ward Clinic; 2 p.m., Sterility Clinic.

## DIARY OF SOCIETIES AND LECTURES

ROYAL SOCIETY OF MEDICINE.—*Mon.*, 4.30 p.m. Section of Odontology. *Tues.*, 4.30 p.m. Section of Medicine. *Thurs.*, 5 p.m. Section of Urology. *Fri.*, 3 p.m. Section of Epidemiology and State Medicine.

CHADWICK TRUST.—At St. Mary's Hospital Medical School, Norfolk Place, Praed Street, Paddington, W., *Tues.*, 4.30 p.m., Sir Harold Morris, K.C.; Sir Malcolm Morris, Dermatologist—Some Personal Reminiscences.

EDINBURGH UNIVERSITY.—*Tues.*, 2 p.m. Brig. George Riddoch: Sciatica.

MEDICAL SOCIETY FOR THE STUDY OF VENEREAL DISEASES, 11, Chandos Street, W.—*Sat.* (Nov. 27), 2.30 p.m., Drs. J. N. Orpwood Price and J. A. Burgess: Is a "New Deal" in Venereal Disease Control Necessary?

**B.M.A.: Diary of Central Meetings**

DECEMBER

2. Thurs. Journal Board, 1.45 p.m.

## BIRTHS, MARRIAGES, & DEATHS

*The charge for inserting announcements under this head is* 10s. 6d. *This amount should be forwarded with the notice, authenticated with the name and address of the sender, and should reach the Advertisement Manager not later than first post Monday morning to ensure insertion in the current issue.*

BIRTHS

FLETCHER.—On Sunday, Oct. 24, 1943, at Howard Place, Carlisle, to Mollie (*née* Carlisle), wife of Tom Fletcher, M.D., D.P.H., B.Hy., of Papcastle, Cockermouth, a son—George Iain Carlisle.

GILLHESPY.—On Nov. 11, 1943, at Adlington Hall, Cheshire, to Frances, wife of Squad. Ldr. R. O. Gillhespy, M.B., M.R.C.P., a son.

STANFORD.—On Oct. 30, 1943, to Brigid (*née* O'Beirn), M.B., B.Ch., wife of Cuthbert Stanford, M.B., B.Ch., Scunthorpe, a daughter—Mary.

WADDINGTON.—On Nov. 1, 1943, to Ella (*née* Mylchreest), wife of Dr. J. K. Waddington, 253, Nantwich Rd., Crewe, a daughter, both well.

WARREN.—On Nov. 12, 1943, at St. David's Wing, Royal Northern Hospital, N.7, to Josephine (Josephine Barnes, F.R.C.S.), wife of Captain H. B. S. Warren, R.A.M.C., a daughter.

MARRIAGES

GOODWIN—ROBERTSON.—On Oct. 30, 1943, at St. Michael's, Chester Square, John Forrest Goodwin, M.B., L.R.C.P., to Barbara Cameron Robertson, C.S.M.M.G.

LUNAN—HARRISON.—On Sept. 8, 1943, at Zanzibar, Murray Lunan, B.Sc., A.I.C.T.A., Agricultural Officer, Tanganyika, to Elizabeth Nora Harrison, M.B., Ch.B., Medical Officer, Zanzibar.

DEATHS

MARSHALL.—On Nov. 6, 1943, at his residence, Tremissary Lodge, Douglas, Isle of Man, Robert Marshall, M.D., aged 75 years, dearly beloved husband of Annie Elizabeth Marshall. Interred at the Borough Cemetery, Douglas, Isle of Man.

STOCKDALE.—On Nov. 2, 1943, at 67, Rodney Street, Liverpool, 1, Ernest Malcolm Stockdale, M.R.C.S., L.R.C.P., beloved husband of Katherine Stockdale. (No flowers; no mourning—by request.)

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Hospital authorities are asked by the Ministry of Health (Circular 2881) until further notice not to submit applications to the Central Medical War Committee for additional posts or for the up-grading of house officers. This follows a recommendation of the Medical Personnel (Priority) Committee that wartime medical establishments of hospitals should not for the present be increased and there should be no up-grading. Hospitals are also asked to defer any similar proposals affecting medical posts—e.g., pathologists at infectious diseases hospitals—which do not come under the Central Medical War Committee's arrangements. The same circular states that women medical officers in whole-time public health appointments who are over military age but who were born after March 5, 1896, must now obtain the permission of the Minister if they wish to apply for other posts.